

A GUIDE FOR PARENTS OF INFANTS AND TODDLERS

AUTISM SPECTRUM DISORDERS

The awareness of autism and autism spectrum disorders (ASD) has increased significantly across the nation over the past decade. Once considered rare, autism is now the fastest growing developmental disorder.

Using national rates, the Alaska Governor's Council on Disabilities and Special Education estimates that about 60 of the 10,000 children born in Alaska each year will develop an autism spectrum disorder. The Centers for Disease Control places the national autism rate at one in 166 live births. Following national trends, rates of autism spectrum disorders are rising in Alaska, further demonstrating the need and importance of early screening.

Early intervention can increase a child's response to treatment and improve overall lifetime skills. Developing more life skills in childhood will enable those with ASD to participate more fully in their families and communities as they move into adulthood.

Screening and Assessment for Autism and ASD

There is no single test for autism or ASD. A diagnosis is based on a variety of observed behavior, educational and psychological testing. Improved diagnostic screening methods can now identify risk for ASD in children who are as young as 16 months old.

Some key behavioral traits that are characteristic of children with autism or ASD:

- Not taking interest in other children

- Not bringing objects to parent
- Not pointing or using index finger to indicate interest
- Not responding when his or her name is called

Seeking a Medical Diagnosis of ASD

A developmental pediatrician, neurologist, child psychiatrist, or a licensed clinical psychologist should complete the diagnostic evaluation for a child with autism or ASD.

A medical diagnosis serves to:

- Provide a general assessment of the child's health status (recommended for all children with possible developmental delays or disorders)
- Identify other conditions (i.e. hearing loss) sometimes confused with autism
- Identify and assess medical conditions or genetic syndromes that are sometimes associated with autism.

In addition to providing an initial diagnosis of ASD, a medical evaluation is an opportunity to establish a diagnosis needed to assess other programs and to get appropriate medical follow-up care.

Autism and ASD Assessment

An ASD assessment will provide information about the strengths and learning challenges of the child and can be very helpful in planning for intervention services.

The components of an ASD assessment should include:



This parent guide is based on the *Service Delivery Guidelines for Alaska: Autism Spectrum Disorders*. The complete guidelines are available online at earlyintervention.alaska.gov

- Developmental, medical, and three-generation family history
- Careful physical and neurological examination
- Developmental evaluation
- Assessment of social interaction, verbal and nonverbal communication, and repertoire of activities and interests and play behavior against the DSM IV TR criteria for autism
- Audiological evaluation
- Assessment of family functioning: strengths, resources, stressors and support needs (emotional and financial)
- Chromosome analysis and DNA testing for Fragile X in children with global developmental delay
- Additional targeted medical assessment based on clinical presentation, including laboratory studies (EEG, MRI, etc.)

What Does Early Intervention for Autism or ASD Look Like?

Early intervention for children with autism or ASD is based on the principle of *individualization*, which means that each child and family's services are based on the child's needs, strengths and interests, and the family's concerns, priorities and resources. This is important because each child and each family is different.

Children with ASD learn in complex ways. Their learning needs, like their autism, transform as they grow and develop. When

parents learn their child may have ASD, they may be led to believe that a certain program will resolve all the issues associated with the condition. Extensive research has been conducted, and although there is evidence that interventions lead to improvements, there does not appear to be a clear, direct relationship between any particular intervention and children's progress.

With any approach, children's outcomes are variable, with some children making substantial progress and others showing very slow gains. While substantial evidence exists that interventions can reach short-term goals in many areas, there is still much we have to learn about the relationships between particular techniques and specific outcomes.

How Can EI/ILP Help?

Ultimately, the best way to approach ASD is to find the intervention strategies that best fit a given child's and family's needs. A good plan will consider the developmental strengths, needs and unique learning style of each child. One child may require a high level of direct instruction, while another may be over-stimulated by it. Approaches may focus on behavior, development or relationships.

The *EI/ILP Service Delivery Guidelines for Alaska: Autism Spectrum Disorders* includes more information on screening and assessment of ASD in young children and an overview of many of the treatment approaches developed to help them.

For More Information

Alaska Early Intervention/Infant Learning Program earlyintervention.alaska.gov
(877) HSS-FMLY. (907) 269-8442. TT Relay (800) 770-TYPE

Alaska Autism Resource Center www.alaskaarc.org
(866) 301-7372. Anchorage (907) 334-1300. Fairbanks (907) 456-2600

Autism Society of America www.autism-society.org
Toll-free (800) 3-Autism

Autism Speaks www.autismspeaks.org
(212) 252-8584